

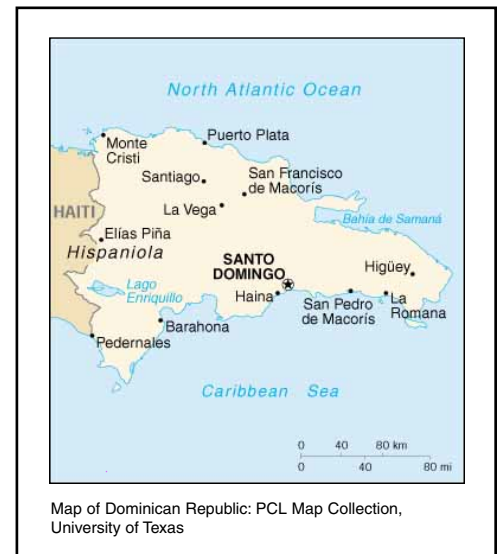
# HIV/AIDS in Dominican Republic and USAID Involvement

The Dominican Republic has emerged as a regional HIV/AIDS “success story” in recent years. National AIDS prevention and control strategies have resulted in measurable reductions in the number of sexual partners and increased condom use, thus reducing risk of HIV infection. The country has also witnessed greater involvement of civil society in the fight against AIDS via the creation of a nongovernmental organization (NGO)/AIDS Coalition and establishment of the Dominican Republic Network of Persons Living with HIV/AIDS (REDOVIH+).

Together, the Dominican Republic and neighboring Haiti account for 85 percent of HIV/AIDS cases in the Caribbean. With an overall prevalence of 2.3 percent, the Caribbean has the highest HIV/AIDS rates in the world outside of sub-Saharan Africa. Migration, low levels of education, and increasing poverty are among the factors contributing to the rapid expansion of the epidemic in this region. According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), by the end of 1999:

- 130,000 adults (2.8 percent of the adult population) were living with HIV/AIDS in the Dominican Republic. (The Dominican Republic’s National Program for the Control of HIV/AIDS estimated that by the end of 2000, 150,000 to 170,000 people were living with HIV);
- 5,120 children under the age of 15 were infected with HIV;
- 4,900 adults and children died of AIDS in 1999; and
- 7,900 children had lost their mother or both parents to AIDS since the beginning of the epidemic.

Though the epidemic has shown signs of stabilizing over the last 5 years, HIV/AIDS continues to threaten groups at high risk of infection. According to 1999 data from the National Program for the Control of Sexually Transmitted Diseases (STDs) and AIDS, 54.6 percent of all newly reported AIDS cases occur in the 15-34 age group. UNAIDS estimates that more than 70 percent of HIV infections in the Dominican Republic are transmitted via heterosexual contact; 8.1 percent are transmitted via men who have sex with men (MSM); and 3.5 percent occur through injecting drug use. As of 1999, the male-to-female ratio of reported AIDS cases was 1.47 to 1. It is important to note that homosexual and bisexual transmission are thought to be underreported, and heterosexual transmission overreported.



In addition:

- Fewer than 5 percent of HIV-positive Dominicans know their serostatus;
- 13 sentinel surveillance sites throughout the country reported that more than 2 percent of pregnant women are HIV-positive;
- Infection rates for commercial sex workers (CSWs) range from 3.5 to 9.5 percent; and
- 4.3 percent of patients with sexually transmitted infections (STIs) are living with HIV/AIDS.

## NATIONAL RESPONSE

The Dominican Republic is making progress in improving health care services for its most vulnerable populations. Over the past three years, the Secretariat of Health has placed greater emphasis on maternal and child health care, HIV/AIDS prevention, and other important health sector reforms. However, the country continues to struggle with a high incidence of HIV transmission, particularly among youth.

USAID/Dominican Republic's active participation and support for the development of the *Plan Estrategico Nacional de ITS/SIDA 2000-2003* (PEN) (National Strategic Plan for HIV/AIDS, 2000-2003), in collaboration with other international and national

agencies, facilitated the implementation of important public policies and programs. A presidential-level AIDS council, *Comision Presidencial del SIDA*, or COPRESIDA, was recently appointed by the President to oversee multisectoral involvement and participation. USAID support for COPRESIDA's participation in observational trips and regional fora was critical to assisting the council in identifying key HIV/AIDS issues.

The Dominican Republic first created an HIV/AIDS unit in 1985. In 1987, this unit evolved into a program for the control of HIV/AIDS and sexually transmitted infections (STIs) (*Programa de Control de Enfermadades de Transmision Sexual y SIDA*, or PROCETS), within the Public Health State Office of the Secretary of Social Aid. Key PROCETS and national government activities include:

- Information, education and communication campaigns;
- Communication training for government and nongovernmental organizations (NGOs);
- Coordination of care and support services for people living with HIV/AIDS;
- Development of programs to reduce mother-to-child transmission (MTCT). (In 2000, USAID supported the implementation of an MTCT pilot program in four public maternity wards);

Key Population, Health, and Socioeconomic Indicators		
Population	8.6 million	U.S. Census Bureau 2001
Growth Rate	1.6%	U.S. Census Bureau 2000*
Life Expectancy	Males: 71 Females: 75	U.S. Census Bureau 2000*
Total Fertility Rate	3	U.S. Census Bureau 2000*
Infant Mortality Rate	36 per 1,000 live births	U.S. Census Bureau 2000*
Maternal Mortality Rate	230 per 100,000 live births	PRB 1998
GNP per capita (US\$)	\$2080	World Bank 2001
Public health expenditure as % GDP	1.9%	World Bank 1998
Adult Literacy (% of people 15 and above)	Males: 83.6% Females: 83.6%	UNESCO 2000

\* From U.S. Census Bureau 2000 HIV/AIDS country profiles, which included data from U.S. Census Bureau, Population Reference Bureau, UNAIDS and WHO.

- Implementation of voluntary counseling and testing (VCT) programs at the two main maternity hospitals in Santo Domingo and at a general hospital in Puerto Plata. (A local NGO in Puerto Plata provides pre- and post-test counseling services within the public hospital);
- Organization of STI syndromic management services, and dissemination of STI norms and training manuals for syndromic management of STIs;
- Coordination of efforts to ensure safety of the blood supply; and
- Monitoring and evaluation of provincial and national plans.

The government has also been successful in approving HIV/AIDS legislation; increasing government and civil society commitment to address the epidemic; and developing a National Strategic Plan.

In an official statement during the June 2001 United Nations General Assembly Special Session on HIV/AIDS, the government of Dominican Republic committed to the following actions over the next five years:

- Development of a sexual education program targeting youth and adolescents;
- Creation of a strategic alliance with the pharmaceutical industry to produce generic anti-retroviral medication at an affordable price;
- Implementation of a national policy to promote and distribute condoms to high-risk groups; and
- Expansion of MTCT prevention efforts throughout the entire public health system, including: access to medications to prevent transmission from mother to child; VCT programs; and provision of safe alternatives to breastfeeding.

## **USAID SUPPORT**

In FY 2001, the **U.S. Agency for International Development (USAID)** allocated \$3.3 million for HIV/AIDS prevention and care activities in the Dominican Republic—a \$1 million increase from FY 2000. USAID supports programs that strive to decrease HIV transmission through behavior change communications and control of STIs, and to reduce the impact of HIV/AIDS in affected populations.

USAID/Dominican Republic revised its HIV/AIDS strategy in 1999 to focus on increasing the use of primary health care services. Its main objectives are to: 1) increase risk perception and health-seeking behavior among the most vulnerable populations; 2) implement successful pilot community-based programs in support of people living with HIV/AIDS; and 3) increase access to information on and services for HIV/STIs for at-risk populations.

USAID/Dominican Republic provides assistance to the National Program for the Control of STDS and AIDS to develop and implement mother-to-child HIV prevention programs, VCT programs, and prepackaged therapy for STIs. The Mission assisted with the development of the 2000-2003 National Strategic Plan for HIV/AIDS Prevention, which served as a framework for drafting 26 provincial and municipal action plans.

USAID is currently initiating a program to implement direct observance of tuberculosis treatment nationwide. The Mission also plans to fund a study of children and families affected by HIV/AIDS in order to develop a strategy for addressing the needs of these populations.

USAID-supported NGOs include the following:

The **Academy for Educational Development's AccionSIDA** project has worked to prevent HIV/AIDS/STIs in the Dominican Republic since 1997. AccionSIDA is committed to improving HIV/AIDS prevention by building the capacity of NGOs involved in family planning, STI treatment, and other health and reproductive health services.

In response to a National AIDS Program request, **Family Health International (FHI)/IMPACT** began providing support for VCT programs at the two main maternity hospitals in Santo Domingo and at a general hospital in Puerto Plata. In addition to VCT, the three hospitals offer individual counseling on prevention of MTCT. In 2001, FHI/IMPACT plans to provide technical assistance and training to select counselors and develop a counseling protocol.

Under the **Population Council's Horizons Program**, research has been conducted in Puerto Plata — an area drawing large numbers of sex tourists — to establish and compare the efficacy of regulatory and voluntary approaches to 100 percent condom use in sex establishments. Specific objectives are to compare clinical, reported, and observed outcome measures at regular intervals over two years. Cost-effectiveness and quality of the interventions will also be assessed.

**Population Services International/AIDSMARK** has conducted a pilot project to assess the feasibility of implementing prepackaged therapy for STIs. The project has proven successful and will be expanded to provide prepackaged therapy to hospitals and clinical sites at the provincial level.

## OTHER U.S. SUPPORT

In 2001, the **Centers for Disease Control and Prevention (CDC)** expanded its global AIDS program to address the epidemic in Latin America and the Caribbean. CDC will provide technical assistance to the Caribbean Epidemiology Center (CAREC), one of the Pan American Health Organization's (PAHO) eight scientific centers, to bolster HIV prevention, and care and treatment programs in the region.

The **National Institutes of Health (NIH)** supports HIV prevention research, AIDS-related training, and infrastructure capacity building programs in the Dominican Republic.

## DONOR SUPPORT

**UNAIDS** and the **European Union** carry out substantial HIV/AIDS prevention activities in the

Dominican Republic, including: funding MTCT prevention programs, implementing mass media campaigns, advocating policy reforms, and providing support to networks for people living with HIV/AIDS. The **United Nations Children's Fund (UNICEF)** is also contributing to HIV/AIDS activities targeted to street children and prevention of MTCT.

A **United Nations Population Fund (UNFPA)** project in the southwestern provinces of the Dominican Republic distributes condoms and provides access to STI and HIV/AIDS counseling, diagnosis, and treatment to residents of *bateyes*—small, poor villages on sugar cane plantations, often home to many Haitian workers, that exhibit the highest rates of HIV and STIs in the country.

In 2001, the **World Bank** announced a \$25 million loan for an HIV/AIDS prevention and control project in the Dominican Republic. The project will bolster programs and activities targeting high-risk groups, expand awareness among the general population, and strengthen institutional capacity. In partnership with the pharmaceutical industry, the project will also help expand the coverage of the mother-to-child HIV prevention program.

## CHALLENGES

According to USAID, the Dominican Republic faces the following challenges in HIV prevention and care:

- Capitalizing on opportunities for cross-border HIV prevention with Haiti;
- Curbing large numbers of new HIV infections among young people;
- Addressing overarching health sector and infrastructure challenges that impede HIV/AIDS prevention and care, including:
  - Recovery from economic and social infrastructure damages caused by Hurricane George in September 1998; and
  - A slowdown in health sector reform due to political transition in 2000.

## **SELECTED LINKS AND CONTACTS**

1. National AIDS Program: Programa Nacional de SIDA/ETS, PROCETS, Calle Mahatma Gandhi No. 351, Apartado 2882, Santo Domingo, Republica Dominica. Tel: (809) 688-5810, Fax: (809) 686-7697.
2. PAHO Country Office: Dra. Socorro Gross, Representante de la OPS/OMS en Republica Dominicana, Calle Pepillo Salcedo, Plaza de la Salud, Edificio Cruz Roja/OPS/OMS, 2da. Planta, Santo Domingo, D.N. Republica Dominicana. Tel: (809) 562-1519, Fax: (809) 544-0322. Email: [e-mail@dor.ops-oms.org](mailto:e-mail@dor.ops-oms.org), Website: [www.ops-oms.org.do](http://www.ops-oms.org.do).

American Embassy/Dominican Republic  
Hans Hertell, Ambassador  
Leopoldo Navarro corner of Cesar Nicolas Penson  
Santo Domingo, Dominican Republic  
Tel: 809-221-2171  
Website: [www.usemb.gov.do/](http://www.usemb.gov.do/)

USAID/Dominican Republic  
Elena Brineman, Director  
Leopoldo Navarro #12  
Santo Domingo, Dominican Republic  
Tel: 809-221-1100  
Fax: 809-221-0444  
Website: [www.usemb.gov.do/usaids.htm](http://www.usemb.gov.do/usaids.htm)

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*Please direct comments on this profile to: [info@synergyaids.com](mailto:info@synergyaids.com).*

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